

**Application Data Sheet****Application Information**

Application number::  
Filing Date:: 07/15/03  
Application Type:: Regular  
Subject Matter:: Utility  
Suggested classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R??:  
Number of CD disks::  
Number of copies of CDs::  
Sequence Submission::  
Computer Readable Form (CRF)?::  
Number of copies of CRF::  
Title:: Control of Relay Opening Events  
Attorney Docket Number:: 210-589  
Request for Early Publication:: No  
Request for Non-Publication:: No  
Suggested Drawing Figure::  
Total Drawing Sheets:: 4  
Small Entity?: No  
Latin name::  
Variety denomination name::  
Petition included?: No  
Petition Type::  
Licensed US Govt. Agency::  
Contract or Grant Numbers One::  
Secrecy Order in Parent Appl.: No

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: James  
Middle Name:: Douglas  
Family Name:: Wilson  
Name Suffix::  
City of Residence:: Benton  
State or Province of Residence:: AR  
Country of Residence:: US  
Street of Mailing Address:: 1116 Crystal Drive  
City of Mailing Address:: Benton  
State or Province of Mailing Address:: AR  
Country of Mailing Address:: US  
Postal or Zip Code of Mailing Address:: 72015

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Jason  
Middle Name:: Shain  
Family Name:: Breland  
Name Suffix::  
City of Residence:: Conway  
State or Province of Residence:: AR  
Country of Residence:: US  
Street of Mailing Address:: 1548 Cadron Settlement Lane  
City of Mailing Address:: Conway  
State or Province of Mailing Address:: AR  
Country of Mailing Address:: US  
Postal or Zip Code of Mailing Address:: 72034

**Correspondence Information**

Correspondence Customer Number:: 20874

**Representative Information**

Representative Customer Number::	20874
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**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

**Assignee Information**

Assignee Name:: Carrier Corporation  
Street of mailing address:: Carrier World Headquarters, One Carrier Place  
City of mailing address:: Farmington  
State or Province of mailing address:: CT  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 06034